

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

To Protect Our Heritage PAC

ADDRESS (number and street) 2421 W. Pratt
Chicago IL 60645

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00135541

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post -Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 01 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Alan E. Molotsky

Signature of Treasurer Electronically Filed by Alan E. Molotsky Date 07 31 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
To Protect Our Heritage PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		207496.35
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	207496.35									
(c) Total Receipts (from Line 19)	31285.43	31285.43								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	238781.78	238781.78								
7. Total Disbursements (from Line 31)	23816.15	23816.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	214965.63	214965.63								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
To Protect Our Heritage PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	22050.00	22050.00
(ii) Unitemized	8895.87	8895.87
(iii) TOTAL (add Lines 11(a)(i) and (ii)	30945.87	30945.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	30945.87	30945.87
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	339.56	339.56
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	31285.43	31285.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31285.43	31285.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	10066.15	10066.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	10066.15	10066.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13750.00	13750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23816.15	23816.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23816.15	23816.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	30945.87	30945.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30945.87	30945.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10066.15	10066.15
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10066.15	10066.15

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Sanford L Barr		Date of Receipt	
	Mailing Address 832 Dauphine Court		M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5695
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
	Name of Employer Sanford L. Barr, DDS		Occupation Dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

Contribution to PAC

B.	Full Name (Last, First, Middle Initial) Mr. Michael Bauer		Date of Receipt	
	Mailing Address 2500 N. Lakeview Ave.		M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5708
	Chicago	IL	60614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
	Name of Employer Espirito & Associates		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Contribution to PAC

C.	Full Name (Last, First, Middle Initial) Marlys Beider		Date of Receipt	
	Mailing Address 1242 N. Lake Shore Drive		M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5706
	Chicago	IL	60610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
	Name of Employer Self		Occupation Hotel Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Contribution to PAC

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Full Name (Last, First, Middle Initial)
Jack Berger

Mailing Address 901 W. Huron

City Chicago State IL Zip Code 60622

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009

Transaction ID: SA11AI.5689

Amount of Each Receipt this Period 250.00

Contribution to PAC

B. Full Name (Last, First, Middle Initial)
Jack Berger

Mailing Address 901 W. Huron

City Chicago State IL Zip Code 60622

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 27 / 2009

Transaction ID: SA11AI.5690

Amount of Each Receipt this Period 350.00

Contribution to PAC

C. Full Name (Last, First, Middle Initial)
Howard Bernstein

Mailing Address 6541 N. Kilbourn Ave.

City Lincolnwood State IL Zip Code 60712

FEC ID number of contributing federal political committee. **C**

Name of Employer J.H. Chapman Group, LLP Occupation Principal of Investment Banking Firm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 02 / 2009

Transaction ID: SA11AI.5707

Amount of Each Receipt this Period 250.00

Contribution to PAC

SUBTOTAL of Receipts This Page (optional) ► 850.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Alan Cahn	Date of Receipt MM / DD / YYYY 05 / 14 / 2009
	Mailing Address 6653 N. Minnehaha	Transaction ID: SA11AI.5701
	City State Zip Code Lincolnwood IL 60712	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution to PAC
	Name of Employer Occupation Walgreens Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) William DeWoskin	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 1000 N. Lakeshore Dr., #27B	Transaction ID: SA11AI.5693
	City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution to PAC
	Name of Employer Occupation Self Real Estate Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Howard Epstein	Date of Receipt MM / DD / YYYY 02 / 27 / 2009
	Mailing Address 247 Franklin Road	Transaction ID: SA11AI.5705
	City State Zip Code Glencoe IL 60022	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution to PAC
	Name of Employer Occupation Self Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)
Walter Fried

Mailing Address 2174 Tennyson Lane

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Surevision Eye Center Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
02 / 22 / 2009

Transaction ID: SA11AI.5696

Amount of Each Receipt this Period 250.00

Contribution to PAC

B.

Full Name (Last, First, Middle Initial)
Walter Fried

Mailing Address 2174 Tennyson Lane

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Surevision Eye Center Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt MM / DD / YYYY
06 / 07 / 2009

Transaction ID: SA11AI.5697

Amount of Each Receipt this Period 200.00

Contribution to PAC

C.

Full Name (Last, First, Middle Initial)
Shayle Gerstein

Mailing Address 9655 Woods Dr.

City State Zip Code
Skokie IL 60077

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
02 / 22 / 2009

Transaction ID: SA11AI.5709

Amount of Each Receipt this Period 250.00

Contribution to PAC

SUBTOTAL of Receipts This Page (optional) 700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial) Arthur Goldner		Date of Receipt MM / DD / YYYY 02 / 19 / 2009
Mailing Address 40 Maple Hill Road		Transaction ID: SA11AI.5770
City Glencoe	State IL	Zip Code 60022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Arthur Goldner & Associates	Occupation Real estate executive	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Diane Horwitz		Date of Receipt MM / DD / YYYY 06 / 02 / 2009
Mailing Address 247 E. Chestnut St.		Transaction ID: SA11AI.5694
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Educator	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Joseph Kramer		Date of Receipt MM / DD / YYYY 02 / 27 / 2009
Mailing Address 4545 W. Touhy, #201		Transaction ID: SA11AI.5704
City Lincolnwood	State IL	Zip Code 60712
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Charles Kurland		Date of Receipt
	Mailing Address 188 Park Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Glencoe	IL	60022
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	Transaction ID: SA11AI.5769
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 250.00	<input type="text"/> 250.00
Contribution to PAC			

B.	Full Name (Last, First, Middle Initial) Max Lorig		Date of Receipt
	Mailing Address 718 Carlyle Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Northbrook	IL	60062
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Lorig Construction		Occupation Chairman	Transaction ID: SA11AI.5691
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 500.00	<input type="text"/> 500.00
Contribution to PAC			

C.	Full Name (Last, First, Middle Initial) Stephen Malkin		Date of Receipt
	Mailing Address 440 Lakeside Terrace		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Glencoe	IL	60022
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Range Capital Management		Occupation Executive	Transaction ID: SA11AI.5685
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 5000.00	<input type="text"/> 5000.00
Contribution to PAC			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Steven Rothke	Date of Receipt MM / DD / YYYY 02 / 23 / 2009
	Mailing Address 7633 N. Arcadia	Transaction ID: SA11AI.5702
	City State Zip Code Morton Grove IL 60053	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution to PAC
	Name of Employer: NeuroBehavior & Rehab Network Occupation: Neuropsychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Michael J. Sacks	Date of Receipt MM / DD / YYYY 05 / 07 / 2009
	Mailing Address 1425 Waverly	Transaction ID: SA11AI.5683
	City State Zip Code Highland Park IL 60035	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Contribution to PAC
	Name of Employer: Grosvenor Investment Management Occupation: Investment advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Ms Beverly Sandler	Date of Receipt MM / DD / YYYY 04 / 22 / 2009
	Mailing Address 2335 Robertson Lane	Transaction ID: SA11AI.5687
	City State Zip Code Flossmoor IL 60422	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution to PAC
	Name of Employer: Self employed Occupation: Shoe store owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional)	7570.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 25
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)
Ms Beverly Sandler

Mailing Address 2335 Robertson Lane

City State Zip Code
Flossmoor IL 60422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self employed Shoe store owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2009

Transaction ID: SA11AI.5686

Amount of Each Receipt this Period
250.00

Contribution to PAC

B.

Full Name (Last, First, Middle Initial)
Lawrence Savitt

Mailing Address 1771 Mission Hills #316

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lawrence Medical Supply President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2009

Transaction ID: SA11AI.5699

Amount of Each Receipt this Period
250.00

Contribution to PAC

C.

Full Name (Last, First, Middle Initial)
David Small

Mailing Address 1765 Lake Ave.

City State Zip Code
Highland Park IL 60035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Grosenor Capital Management Management/Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: SA11AI.5703

Amount of Each Receipt this Period
250.00

Contribution to PAC

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 25
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)
Ms Alona Sussman

Mailing Address 1207 Sherwood Road

City State Zip Code
Glenview IL 60025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Axa Advisers Investment adviser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2009

Transaction ID: SA11AI.5692

Amount of Each Receipt this Period
500.00

Contribution to PAC

B.

Full Name (Last, First, Middle Initial)
Mr. Richard Templer

Mailing Address 303 W. Madison

City State Zip Code
Chicago IL 60606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: SA11AI.5684

Amount of Each Receipt this Period
5000.00

Contribution to PAC

SUBTOTAL of Receipts This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	22050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: SA17.5727

Amount of Each Receipt this Period
60.13

Interest on bank account

B. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: SA17.5728

Amount of Each Receipt this Period
51.06

Interest on bank account

C. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

Transaction ID: SA17.5729

Amount of Each Receipt this Period
44.12

Interest on bank account

SUBTOTAL of Receipts This Page (optional) ► **155.31**

TOTAL This Period (last page this line number only) ► **155.31**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Department of Treasury City Ogden State TN Zip Code 84409 Purpose of Disbursement Tax due on interest earned Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5716 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 9 Amount of Each Disbursement this Period 1195.25 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Jewish United Fund Mailing Address 1 S. Franklin St. City Chicago State IL Zip Code 60606 Purpose of Disbursement Advertising PAC name at community event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5737 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 9 Amount of Each Disbursement this Period 600.00 004 Category/ Type
C.	Full Name (Last, First, Middle Initial) Myron Martin Mailing Address 6905 N. Kilbourn City Lincolnwood State IL Zip Code 60712 Purpose of Disbursement Publicity for educational event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5764 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 9 Amount of Each Disbursement this Period 350.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2145.25
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Alan E. Molotsky	Transaction ID: SB21B.5754 Date of Disbursement 02 / 15 / 2009
	Mailing Address 3939 W. Greenwood	Amount of Each Disbursement this Period 546.00
	City Skokie State IL Zip Code 60076	
	Purpose of Disbursement Reimbursement for postage and copying for member mailings Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alan E. Molotsky	Transaction ID: SB21B.5750 Date of Disbursement 05 / 13 / 2009
	Mailing Address 3939 W. Greenwood	Amount of Each Disbursement this Period 264.57
	City Skokie State IL Zip Code 60076	
	Purpose of Disbursement Postage and copying for member mailings Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Moneris Solutions Inc.	Transaction ID: SB21B.5713 Date of Disbursement 04 / 06 / 2009
	Mailing Address 700 East Lake Cook Road	Amount of Each Disbursement this Period 144.77
	City Elk Grove Village State IL Zip Code 60089	
	Purpose of Disbursement Credit card processing fee Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	955.34
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Moneris Solutions Inc.	Transaction ID: SB21B.5714 Date of Disbursement 05 / 06 / 2009
	Mailing Address 700 East Lake Cook Road	Amount of Each Disbursement this Period 58.79
	City Elk Grove Village State IL Zip Code 60089	
	Purpose of Disbursement Credit card processing fee	003 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Moneris Solutions Inc.	Transaction ID: SB21B.5715 Date of Disbursement 06 / 06 / 2009
	Mailing Address 700 East Lake Cook Road	Amount of Each Disbursement this Period 56.63
	City Elk Grove Village State IL Zip Code 60089	
	Purpose of Disbursement Credit card processing fee	003 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Simon O'Rourke	Transaction ID: SB21B.5762 Date of Disbursement 06 / 07 / 2009
	Mailing Address 332 S. Michigan Suite 1100	Amount of Each Disbursement this Period 300.00
	City Chicago State IL Zip Code 60604	
	Purpose of Disbursement Honorarium for speaker at educational event	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	415.42
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Pace Printing	Transaction ID: SB21B.5747 Date of Disbursement																			
	Mailing Address 2421 W. Pratt	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	6		2	0	0	9												
	City Chicago State IL Zip Code 60645	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Printing of newsletter for members	<table border="1"><tr><td>400.00</td></tr></table>	400.00																		
400.00																					
	Candidate Name	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Pace Printing	Transaction ID: SB21B.5748 Date of Disbursement																			
	Mailing Address 2421 W. Pratt	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City Chicago State IL Zip Code 60645	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Printing of mailing to members	<table border="1"><tr><td>184.00</td></tr></table>	184.00																		
184.00																					
	Candidate Name	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Proclaiming Justice to the Nations	Transaction ID: SB21B.5746 Date of Disbursement																			
	Mailing Address P.O. Box 682711	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	1		2	0	0	9												
	City Franklin State TN Zip Code 37068	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Honorarium for educational event speaker	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1584.00</td></tr></table>	1584.00
1584.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Eric Rapaport	Transaction ID: SB21B.5743
	Mailing Address 434 Regent Drive	Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	City Buffalo Grove State IL Zip Code 60089	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Consulting on web page design	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Eric Rapaport	Transaction ID: SB21B.5744
	Mailing Address 434 Regent Drive	Date of Disbursement MM / DD / YYYY 05 / 18 / 2009
	City Buffalo Grove State IL Zip Code 60089	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Consulting on web page design	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Peggy P. Shapiro	Transaction ID: SB21B.5755
	Mailing Address 4545 W. Touhy	Date of Disbursement MM / DD / YYYY 06 / 07 / 2009
	City Lincolnwood State IL Zip Code 60712	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Reimburse for copying and printing for educational event	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Peggy P. Shapiro Mailing Address 4545 W. Touhy City Lincolnwood State IL Zip Code 60712 Purpose of Disbursement Reimburse for member e-mail service provider charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5740 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 9	Amount of Each Disbursement this Period 86.06
B.	Full Name (Last, First, Middle Initial) US Post Office Mailing Address Dirkson Federal Office Building City Chicago State IL Zip Code 60604 Purpose of Disbursement Postage for member mailings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5753 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9	Amount of Each Disbursement this Period 571.20
C.	Full Name (Last, First, Middle Initial) US Post Office Mailing Address Dirkson Federal Office Building City Chicago State IL Zip Code 60604 Purpose of Disbursement Postage for member mailings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5749 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 9	Amount of Each Disbursement this Period 882.00

SUBTOTAL of Disbursements This Page (optional)	1539.26
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 22 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Full Name (Last, First, Middle Initial) Tamar Weissberg <hr/> Mailing Address 4820 W. Sherwin <hr/> City Lincolnwood State IL Zip Code 60712 <hr/> Purpose of Disbursement Reimburse for copying and paper for educational event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5756 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 140.17 <hr/> Category/Type 001
B. Full Name (Last, First, Middle Initial) Victor Weissberg <hr/> Mailing Address 4820 W. Sherwin <hr/> City Lincolnwood State IL Zip Code 60712 <hr/> Purpose of Disbursement Reimburse for travel expense for educational speaker Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5752 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 155.68 <hr/> Category/Type 002

SUBTOTAL of Disbursements This Page (optional) ►

295.85

TOTAL This Period (last page this line number only) ►

9235.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) BERKLEY FOR CONGRESS	Transaction ID: SB23.5731 Date of Disbursement
	Mailing Address 3069 Conquista Court	<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Las Vegas State NV Zip Code 89121	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to election campaign	<input type="text" value="1000.00"/>
	Candidate Name BERKLEY FOR CONGRESS	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BIGGERT, JUDY	Transaction ID: SB23.5732 Date of Disbursement
	Mailing Address P.O. Box 637	<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City Hinsdale State IL Zip Code 60522	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to election campaign	<input type="text" value="1000.00"/>
	Candidate Name BIGGERT, JUDY	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FEIGENHOLTZ, SARA	Transaction ID: SB23.5734 Date of Disbursement
	Mailing Address 3213 N WILTON AVE APT A	<input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City CHICAGO State IL Zip Code 60657	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to election campaign	<input type="text" value="1500.00"/>
	Candidate Name FEIGENHOLTZ, SARA	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) FOSTER, G. WILLIAM (BIL)	Transaction ID: SB23.5736
	Mailing Address 39w341 Preston Circle	Date of Disbursement 06 / 08 / 2009
	City Geneva State IL Zip Code 60134	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution to election campaign	011 Category/ Type
	Candidate Name FOSTER, G. WILLIAM (BIL)	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) INOUYE, DANIEL K	Transaction ID: SB23.5733
	Mailing Address 1088 BISHOP STREET SUITE 1009	Date of Disbursement 03 / 24 / 2009
	City HONOLULU State HI Zip Code 96813	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution to election campaign	011 Category/ Type
	Candidate Name INOUYE, DANIEL K	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KIRK FOR CONGRESS	Transaction ID: SB23.5717
	Mailing Address P.O. Box 8	Date of Disbursement 04 / 27 / 2009
	City Winnetka State IL Zip Code 60093	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution to Campaign Committee	011 Category/ Type
	Candidate Name KIRK FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)
LIPINSKI, DANIEL WILLIAM

Mailing Address 4501 GRAND AVENUE

City State Zip Code
WESTERN SPRINGS IL 60558

Purpose of Disbursement
Campaign check never cashed reported for 7/31/2008

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 03

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5765
Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

-750.00

B.

Full Name (Last, First, Middle Initial)
MURRAY, PATTY

Mailing Address PO BOX 3662

City State Zip Code
SEATTLE WA 98124

Purpose of Disbursement
Contribution to election campaign

Candidate Name
MURRAY, PATTY

011
Category/
Type

Office Sought: House
 Senate
 President
State: WA District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5730
Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

-250.00

TOTAL This Period (last page this line number only)

13750.00